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Bib Data Sheet

D. Harvey

CONFIRMATION NO. 7541

<b>SERIAL NUMBER</b> 10/037,766	<b>FILING DATE</b> 10/23/2001 <b>RULE</b>	<b>CLASS</b> 381	<b>GROUP ART UNIT</b> 2644	<b>ATTORNEY DOCKET NO.</b> AUD1P009
<b>APPLICANTS</b> Chaoying Zhang, Sunnyvale, CA; Zazhang Hou, Cupertino, CA;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/242,089 10/23/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 01/29/2002				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 33
			<b>INDEPENDENT CLAIMS</b> 7	
<b>ADDRESS</b> 22434				
<b>TITLE</b> Method and system for remotely upgrading a hearing aid device				
<b>FILING FEE RECEIVED</b> 655	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	